LILY POND PAPER

ORDER FORM (Complete one form per recipient)

CUSTOMER			
BILLING		DELIVERY	
Name:		Name:	
Address:		Address:	
Town, State, Zip Code:		Town, State, Zip Co	de:
Phone:		Phone:	
Email:		Delivery Date:	
OCCASION	_		
 Anniversary Baby Shower Baptism/Christening Bar/Bat Mitzvah Birthday Bridal Shower Christmas 	Easter Engagemen Graduation Just Because Hanukkah Host/Hoste Housewarm	e D	Mother's/Father's Day Retirement Thank you Valentine's Day Other

COL	OR		
	Red Orange Yellow Green Aqua	Blue Pink Purple White Black	Gold Silver The Rainbow! Other

Housewarming

STYLE

Classic Creative

PICK UP ADDRESS 1	RECIPIENT
Name/Business:	То:
Address:	From:
Town, State, Zip Code	Message:
Date of Pick Up	
PICK UP ADDRESS 2	SHIPPING/DELIVERY ADDRESS
Name/Business:	Name:
Address:	Address:
Town, State, Zip Code:	Town, State, Zip Code:
Date of Pick Up:	Delivery Date:

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Write in any additional pick-up addresses or instructions below and include in your email.